

FEC FORM 2 STATEMENT OF CANDIDACY

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2021 MAY 20 PM 12:11

1. (a) Name of Candidate (in full) Schneider, Jan, , Ms.			2. Candidate's FEC Identification Number H2FL13139	
(b) Address (number and street) 227 Seagull Lane		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Sarasota FL 34236		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate FL 16		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) FRIENDS OF JAN SCHNEIDER		C00447474	
(b) Address (number and street) 227 SEAGULL LANE			
(c) City, State, and ZIP Code SARASOTA FL 34236			

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

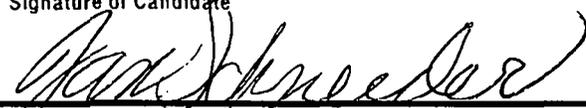
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)			
(b) Address (number and street)			
(c) City, State, and ZIP Code			

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 05/07/2021
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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NONDISCRIMINATION COMPLAINT

Jan Schneider
227 Seagull Lane
Sarasota, FL 34236

19

TAMPA FL 335

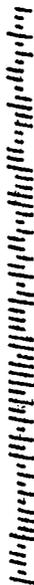
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Federal Election Commission
1050 First Street, NE
Washington, DC 20463

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NON-FEDERAL COMMUNICATIONS

Federal Election Commission
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service. (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JPM
 PREPARER 5/21/21
 (3/2015) DATE PREPARED

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